Image# 28933369349 107**0**3**1**200**8** 16:55

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation					
NARAL Pro-Choice America					
(b) Address (number and street)					
Suite 700					
(c) City, State and ZIP Code	FEC Identification Number				
Washington DC 20005					
2. Corporate filers only	C C90004185				
Is the filer a qualified nonprofit corporation?					
Individual filers only Name of Employer	Decupation				
Traine of Employer					
4. TYPE OF REPORT (check appropriate boxes):					
(a) April 15 Quarterly Report	Notice				
☐ July 15 Quarterly Report					
October Quarterly Report					
☐ January 31 Year-End Report					
January 31 Tear-Lift Report					
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \(\text{X} \)					
5. COVERING PERIOD: FROM 10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
THROUGH					
M _{1.0} / D _{0.1} / Y _{2.2} 0 0 8 Y					
6. TOTAL CONTRIBUTIONS	0.00				
7. TOTAL INDEPENDENT EXPENDITURES	8758.56				
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or i request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	the independent expenditures				
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE				
THE STATE OF PERSON SOME PERSON STATE OF THE	DATE				
John Rotto	10/01/2222				
John Botts	10/01/2008				
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.					

 $For \ further \ information, \ contact:$

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E

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500 LINE 7 500 500M 5

ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) NARAL Pro-Choice America Full Name (Last, First, Middle Initial) of Payee Date NARAL Pro-Choice America 2008 Mailing Address Amount 1156 15th Street, NW, Suite 700 173.06 State Zip Code DC 20005 Washington Purpose of Expenditure Office Sought: Category/ House State: DC List Rental (GOTV Alert) Type Presidential Senate District: 00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2008 443173.09 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date NARAL Pro-Choice America 2008 Mailing Address **Amount** 1156 15th Street, NW, Suite 700 173.07 Zip Code City State Washington DC 20005 Purpose of Expenditure Office Sought: House State: DC Category/ List Rental (GOTV Alert) Type Presidential Senate District: 00 Х President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 443173.09 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Pacific East м₁ м 2008 Mailing Address Amount PO Box 439 32.67 Zip Code City State WA 98929-5043 Sumas Purpose of Expenditure Office Sought: State: DC Category/ House Graphic design Type Presidential Senate District: 00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2008 443173.09 for Office Sought Other (specify) 378.80 (a) SUBTOTAL of Itemized Independent Expenditures .. (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures

(carry total from last page forward to Line 7)

SCHEDULE 5-E

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ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) NARAL Pro-Choice America Full Name (Last, First, Middle Initial) of Payee Date Pacific East 2008 Mailing Address PO Box 439 Amount 17.49 City State Zip Code WA 98929-5043 Sumas Purpose of Expenditure Office Sought: House State: DC Category/ Graphic design Type Presidential Senate District: _00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2008 443173.09 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Adams, Hussey & Associates 2008 Mailing Address **Amount** 1600 Wilson Blvd. Suite 300 1900.00 City State Zip Code Arlington VA 22209 Purpose of Expenditure Office Sought: House State: DC Category/ **Direct Mail Production** Type Presidential Senate District: 00 Х President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2008 443173.09 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Adams, Hussey & Associates м₁ м 2008 Mailing Address Amount 1600 Wilson Blvd. Suite 300 2000.00 City Zip Code State VA 22209 Arlington Purpose of Expenditure Office Sought: State: DC Category/ House **Direct Mail Production** Type Presidential Senate District: 00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2008 443173.09 for Office Sought Other (specify) 3917.49 (a) SUBTOTAL of Itemized Independent Expenditures .. (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

FOR LINE 7 FOR FORM 5

NARAL Pro-Choice America		
Full Name (Last, First, Middle Initial) of Payee Harris Direct		Date Date D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6800 Owensmouth Ave., S		Amount 2 0 0 8
City State Canoga Park CA	Zip Code 91303	1690.70
Purpose of Expenditure Direct Mail Production	Category/ Type	Office Sought: House State: DC Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure John McCain	е:	Check One: X President Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	443173.09	Disbursement For: 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee SD&A		Date Date D D
Mailing Address 5757 West Century Blvd.		Amount
City State Los Angeles CA	Zip Code 90045	1349.12
Purpose of Expenditure Telemarketing	Category/ Type	Office Sought: House State: DC Presidential Senate State: DC
Name of Federal Candidate Supported or Opposed by Expenditure John McCain	Check One: Sociate District: O Support X Oppose	
Calendar Year-To-Date Per Election for Office Sought	443173.09	Disbursement For: Primary X General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Direct Advantage Marketing		Date Date Date Date Date Date Date Date Dat
Mailing Address PO Box 55043		Amount
City State Boston MA	Zip Code 02205	1422.45
Purpose of Expenditure Telemarketing	Category/ Type	Office Sought: House State: DC Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure John McCain	e:	Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	443173.09	Disbursement For: 2008 Other (specify) Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures		4462.27
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		8758.56